# PART B - FEE(S) TRANSMITTAL

Complete **and** send this form, together with applicable fee(s), to: <u>Mail</u>

Mail Stop ISSUE FEE Commissioner for Patents

OCT 1 1 2005			or <u>E</u>	Alexa	P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885  CATION FEE (if required). Blocks 1 through 5 should be completed where of maintenance fees will be mailed to the current correspondence address as orrespondence address; and/or (b) indicating a separate "FEE ADDRESS" for		
INSTRUCTIONS: This for properties all further compared and supplies corrected maintenance fee potitication	orm should be used for tran rrespondence including the l below or directed otherwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and Property of the pro	UBLICATION ication of main new correspon	FEE (if requ tenance fees v dence address	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for
CORRENT CORRESPONDENT	DENCE ADDRESS (Note: Use Block 1 for any change of address)  7590 07/20/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
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/12/2005 CCHAU2 00000044 10007619				Compliantias			(Depositor's name)
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FC:8001 FC:1504	30.00 DP 300.00 DP			0c	tober	<b>7</b> 7 2005	(Date)
APPLICATION NO.	FILING DATE	FIRST NAME		INVENTOR	******	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/007,619	10/007,619 11/07/2001		Arun Kumar			IMRS-364	4188
APPLN. TYPE	SMALL ENTITY	ISSUE F	ee I	PUBLICAT	ION FEE	TOTAL SEE(S) DUE	DATE DUE
	1			\$30		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional NO		\$1400			\$1700	10/20/2005
EXAMINER		ART UNIT		CLASS-SU	CLASS-SUBCLASS		
NGUYEN, O	CAM LINH T	2161		707-00	3000		
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Lipsitz & McAllist  2  3				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will appe T a substitute fo	ar on the paten or filing an assi	t. If an assign gnment.	ee is identified below, the o	document has been filed for
(A) NAME OF ASSIGN	EE	(B	) RESIDENCE	E: (CITY and S	TAȚE OR CO	UNTRY)	
Hyperion	Solutions Co	rporati	on	Śa	nta Cl	ara, CA	
Please check the appropriate	e assignee category or categor	ries (will not be pr	inted on the pa	tent): 🗖 Ind	ividual 🖾 C	orporation or other private gr	oup entity Government
4a. The following fee(s) are	enclosed:	46	Payment of F	` /	·		
Issue Fee				the amount of			
<ul> <li>☑ Publication Fee (No small entity discount permitted)</li> <li>☑ Advance Order - # of Copies10</li> </ul>			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
	(from status indicated above MALL ENTITY status. See		☐ b. Applica	nt is no longer of	claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	e Fee and Publica vill not be accepted nt and Trademark					
						tobor 7 200	

Authorized Signature \_

Barry R. Lipsitz Typed or printed name \_

28,637 Registration No. \_

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)
	) Examiner: <b>C. Nguyen</b>
Kumar, et al.	)
	) Art Unit: <b>2161</b>
Application No.: <b>10/007,619</b>	)
	)
Filed: November 7, 2001	)
	) Date of Notice of
For: METHOD FOR EXTRACTING DATA FROM	) Allowance: <b>July 20, 2005</b>
A RELATIONAL DATABASE USING A	)
DEDICED OTTEDY	<b>\</b>

### MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### **CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail, postage prepaid, in an envelope addressed to MAIL STOP ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

October 7, 2005.

By: Core Propries

### PAYMENT OF ISSUE FEE

Dear Sir:

Enclosed please find a check in the amount of \$1,730 for payment of the Issue Fee, Publication Fee and ten advance order copies in the above-referenced application.

The Issue Fee Transmittal form PTOL-85B is also enclosed.

The Commissioner is hereby authorized to charge any deficiency in the payment of the required fee(s) or credit any overpayment to Deposit Account No. 50-0625.

Respectfully submitted,

Attorney Docket No.: IMRS-364

Date: October 7, 2005

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